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ABSTRACT ID: EG1295353

TÍTULO: **Surgical outcome of Gastric Cancer in patients older than 80 years**

OBJECTIVO/ INTRODUÇÃO: The increasing life expectancy leads to a higher incidence of gastric cancer (GC) in elderly patients. Although there is higher operative morbidity, literature shows similar oncologic outcomes. The aim of this study is to retrospectively review the clinicopathologic features and surgical outcome of elderly (>80 years) patients treated for GC.

MATERIAL E MÉTODOS: Retrospective cohort study of 1157 patients resected with curative intent for GC between 1985 and 2014. The findings of 57 patients (4,9%) aged 80 or more were compared with those of 1100 younger patients.

RESULTADOS: Extended local resection was mostly performed in male patients (72,2 vs. 60,3%, p=0,003). They also had more proximal (38,5 vs. 10,6%, p=0,001) and bigger than 5cm tumors (92,9 vs. 77,3%, p=0,001). Extended resection was associated with Total Gastrectomy in 89 vs. 32% (p=0,001) and more than D2 lymphadenectomy in 11,4 vs. 2,0% (p=0,001). Operative mortality (7,2 vs 3,5%, p=0,033) and morbidity (41,5 vs. 22,8%, p=0,001) were higher. Five-year overall survival was lower (31 vs. 42%, p=0,001) and associated prognostic factors were age older than 60, male sex, more than 3 organs resected, total gastrectomy, proximal tumor and advanced TNM stage

DISCUSSÃO: Long term survival following gastrectomy with additional organ resection is possible. Due to higher operative morbimortality, judicious selection of these patients must be done.

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